

## **Residential Supported-Living Services Conditions of Participation**

*Residential supported-living services may be provided for recipients who need assistance with the activities of daily living, but whose need for institutional level of care can be met though the support provided in the 24-hour residential supported-living setting. These services are provided in residential settings staffed 24 hours a day by on-site personnel who must be available to meet both scheduled and unpredictable recipient needs. The residential settings must provide a home-like environment where supervision, safety, and security are available for recipients, and social and recreational activities are provided in addition to the services necessary to prevent institutionalization.*

*The provider who chooses to offer residential supported- living services must be certified as a provider of residential supported-living services under 7 AAC 130.220 (b)(3), meet with the requirements of 7 AAC 130.255, and operate in compliance with the following standards.*

### **I. Program administration**

#### **A. Personnel.**

##### **1. Residential supported-living services program administrator.**

- a. The provider must designate a residential supported-living program administrator who is responsible for day-to-day management of the program and who may serve in dual capacity as the assisted living home administrator.
- b. The provider may use a term other than program administrator for this position, e.g., program director, program manager, or program supervisor.
- c. If the administrator's position in the provider's organizational structure is such that the administrator does not manage the daily operations of the home, the provider must designate an individual, who meets the qualifications for the position of program administrator, to provide onsite management for a minimum of 20 hours a week, and whose responsibilities include
  - i. orientation, training, and supervision of direct care workers;
  - ii. implementation of policies and procedures;
  - iii. intake processing and evaluation of new admissions;
  - iv. participation in the development of plan of cares in collaboration with care coordinators and other providers of services;
  - v. ongoing review of the delivery of services, including
    - (A) monitoring the amount, duration, and scope of services to assure delivery as outlined in the plan of care;
    - (B) assessing whether the services assist the recipients to attain the goals outlined in plan of cares; and
    - (C) evaluating the quality of care rendered by direct care workers;
  - vi. development and implementation of corrective action plans for identified problems or deficiencies; and
  - vii. submission of required reports to Senior and Disabilities Services, including critical incident reports.

##### **2. Residential supported-living services direct care workers.**

The provider must employ a number of direct care workers sufficient to allow time for

- a. a daily routine of unhurried assistance with bathing, dressing, and eating at times that meets the needs of each recipient;
- b. assistance with mobility as needed;
- c. toileting and incontinence care to ensure comfort; and
- d. repositioning at a minimum of every two hours for recipients who require such assistance.

**B. Training.**

In addition to the training required under 7 AAC 75.240, the provider must provide training to direct care workers regarding

1. nutrition, hydration, and special diet needs of the recipient population;
2. risk factors and monitoring for skin integrity and urinary tract infections; and
3. fall prevention.

**II. Program operations****A. Evaluation.**

The provider must collaborate with the recipient's care coordinator to determine whether, given the recipient's diagnosis and needs, its direct care workers have the capacity to provide residential supported-living services for that recipient.

**B. Recipient safety.**

The provider must

1. maintain reasonable awareness of the schedule and location of recipients, who do not require supervision or an escort, when those recipients are absent from the assisted living home for the purposes of accessing services or engaging in activities in the community; and
2. contact the recipient's representative or care coordinator when the provider is concerned about an emergent condition regarding the recipient's health, safety, or welfare while in the community.

**C. Recipient activities.**

The provider must accord to recipients

1. a full range of activities ordinarily available in a home, including the opportunity to socialize, to exercise, to participate in household activities, and to be outdoors; and
2. opportunities for contact with family and friends, including visits in the assisted living home.